



Registration FORM

Slalom CUP Jutrosin 2021

Name:		
Surname:		
Class:	(PF1)	(PL1)
License number LSFAl:		
Phone number:		
Facebook profile:		
Insurance number and name of the insurer:		
Notify in the event of an accident	Name:	
	Phone:	

Statement

I, the undersigned, give my consent to participate in the Jutrosin Slalom Championships. I am aware of the risk of participating in competitions. I declare that I have all the qualifications required to perform flights and that the equipment is technically operational.

Competitor's signature

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